

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

2-5-05

SERIAL NO. 10659413 FILING DATE

APPLICANT(S)

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
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38						
39		(1)				
40	X	(1)				
41						
42	X	(1)				
43	X	(1)				
44						
45		(1)				
46		(1)				
47		(1)				
48						
49						
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

CLAIMS	IND	DEP	IND	DEP	IND	DEP
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	4					
TOTAL DEP.	9					
TOTAL CLAIMS	13					